



Harbormaster's Office: Phone (954) 468-0212
FAX# (954) 525-9512

DATE/TIME: _____

FOR U.S. COAST GUARD ONLY
HARBORMASTER ACCESS TO PORT APPLICATION

(Print or type all information)

Rev. 2/19/10

NAME OF SHIP: _____ AGENT: U.S. COAST GUARD

VESSEL CALL SIGN: _____ FLAG: AM

GROSS TONNAGE: _____ LENGTH: _____

DEEP DRAFT IN: _____ DEEP DRAFT OUT: _____

ETA: _____ ETD: _____

ENTRY TIME IF DIFFERENT FROM ETA: _____

PO# FOR PORT EVERGLADES: _____

VESSEL'S ADDRESS: _____

VESSEL'S PHONE #: _____

VESSEL'S FAX #: _____

FROM LAST PORT: _____ TO NEXT PORT: _____

PREFERRED BERTH: _____ ALTERNATE LOCATION: _____

PORT/STARBOARD SIDE TO DOCK: _____

(Check box for services needed for this vessel)

FRESH WATER WASTEWATER REMOVAL

OILY WASTE REMOVAL PORT LINEHANDLERS

OTHER _____

PREFERRED TUG PROVIDER

SEABULK INTL.

MCALLISTER.

STATE OF FLORIDA POLLUTION CONTROL REGULATIONS

VESSEL CONTINGENCY PLAN

YES

NO

TYPE/PRINT SHIP'S REPRESENTATIVE

SIGNATURE

HARBORMASTER

ID#